

REMARKS

Applicant requests entry and consideration of the amendments made herein. Claim 18 has been amended to make it depend from Claim 1.

If the Examiner has any questions or other correspondence regarding this application, Applicant requests that the Examiner contact Applicant's attorney at the below listed telephone number and address.

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Respectfully submitted,

A handwritten signature in black ink, appearing to read "M. Skrehot", written in a cursive style.

Michael K. Skrehot
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